File with: lowa Ethics and Cempaign Disclosure Board 510 E. 12th, Ste. 1A Das Moines, Iowa 50319



PAGE I RETHIR AND COMPAIGN DISCLOSURE BY

Des Moines, lows 50319 Fax: 515-281-4073	FOR INSTRUC DISCLOSUF	TIONS, SEE BACK OF FORM RESUMMARY PAGE	2010 JA	H 15 PH 3	3: 08
COMMITTEE NAME (Must be s	seme as on Statement of (Smanizalion)			
committee +	n reusion	Ke form		FORM DR-2	DIGOLOGICA
iMPORTANT: Indicate by # type of (1) Statewide/Legislative/Judge Sta (4) County Central Contrittee (8)(Subdivision Candidate (8) County I 11) Local Ballot Issue	inding for Retention Candidal County Candidate (6) City C	for: ie (2)State PAC (3)State Party andidate (7)School Board or Other Political and Board or Other Political Subdivision F	Hosel PAC ((Rev. 07/2007) For Office Use Of	DISCLOSURE REPORT
CANDIDATE COMMITTEES OF Candidate Name	NLY:	Political Party (if applicable)	Logged in Scanned	
Office Saught	·	District (If Senate or House)	Audited	
HOME OF PERSON FILM AM FILING A		(563) 332- 4540 TELEPHONE REPORT FOR (1) SLECTION		DATE O	O 10 IGNED
	ort date)	Indicate	by#		
CHECK IF AMENDMENT TO	REPORT DATED			mmittees, enter Da	46 -14
STATEME	NT OF CASH ON HA	AND			
CASH ON HAND at the beginnin committee. This amour of the lest reporting peri	MileT he the	(Total of all funds held by the he cash on hand at the end is first report filed.)		402	7.28
ADD TOTAL MONEY 1	TAKEN IN THIS PERIOD				
Schedule A: Cash Con	tributions total (Attach Sci	hedule A) (*álso see in-kind below)		<u> </u>	0.15
	•	Attach Schedule H)			
	ipplies to Cendidates' C	•			
		SUB-TOTAL			
SUBTRACT TOTAL M	OMEY SPENT THIS PER				
Schedule B: Expenditu			mr)		
	res total (Attach Schedule	: B) (**aiso see debis and loans belo	,		
Schedule F: Loan Rep		B) (**aiso see debts and loans belo edule F)			
	syments total (Attach Sch		**********	40	37.43
CASH ON HAND at the end of the	ayments total (Attach Sch ils reporting period (if final	report belance must be zero)			37.43
CASH ON HAND at the end of the	ayments total (Attach Sch de reporting period (if final de D - Attach Schedule D)	edule F)			37.43
CASH ON HAND at the end of the "UNPAID BILLS (From Schedul IN KIND CONTRIBUTIONS (From Schedul)	ayments total (Attach Sch die reporting period (if final de D - Attach Schedule D) om Schedule E - Attach Sc	edule F) report balance must be zero)			37.43
CASH ON HAND at the end of the "UNPAID BILLS (From Schedul IN KIND CONTRIBUTIONS (From	ayments total (Attach Sch dis reporting period (if final de D - Attach Schedule D) om Schedule E - Attach Sch dischedule F - Attach Sch	report balance must be zero)			
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CASH ON HAND at the end of the "UNPAID BILLS (From Schedul IN KIND CONTRIBUTIONS (From COUTSTANDING LOANS (From COUTSTAND	ayments total (Attach Sch nie reporting period (if final le D - Attach Schedule D) om Schedule E - Attach Sch n Schedule F - Attach Sch Schedule G Attached?)	report batance must be zero)			

For Instructions, See Back of Form CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	Pitse	204	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS	
COMMITTEE NAME (Must be some as on State	· // -	eizetion).		ÇK THIS BOX IF NDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC TO NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE" (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INÇOME
9/21/09	CK#	bank interest	N	\$ 10.15	
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	<u> </u>		SUB-TOTAL	s	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familie relationship, enter "not applicable" in the relationship column.

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TOTAL (If last page of this schedule)